

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000001232

**FILED  
Mar 06, 2023  
Secretary of State  
1820976632CC**

**Entity Name:** 4KIDS OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

2717 WEST CYPRESS CREEK ROAD  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

2717 WEST CYPRESS CREEK ROAD  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** 61-1416525

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JOHN, MATHEW K  
2717 WEST CYPRESS CREEK ROAD  
FORT LAUDERDALE, FL 33309 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** MATHEW K. JOHN

03/06/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name SAUDER, DOUGLAS R  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title SECRETARY  
Name LUKASIK, THOMAS L  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name DAVELL, WILLIAM  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name DAIGLE, STEVEN  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name SCHECHTER, JOHN  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name DAVIS, MARK T  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title EXECUTIVE VICE PRESIDENT,  
TREASURER  
Name JOHN, MATHEW K  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name SEHLKE, J.J.  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KEVIN ENDERS

**PRESIDENT**

03/06/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name KRAVITZ, NORMAN  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name STOKES, DOMINICK  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name BURKE, JOHN  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name MILLS, KATY  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name KARAY, ANN  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name CAVANAGH, BRENDAN  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR, CHAIRMAN  
Name SPRAGUE, KARL  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title PRESIDENT, DIRECTOR  
Name ENDERS, KEVIN  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name BARSOUM, MICHELLE  
Address 2717 WEST CYPRESS CREEK ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309